

National Center on Birth Defects and Developmental Disabilities

Annual Report | Fiscal Year 2013



Improving the Health of People with Disabilities



[Disability](#) is part of the normal human experience and having a disability does not – and should not – equal poor health. Unfortunately, there are major health gaps that make it more challenging for a portion of the estimated 37 million to 56 million¹ people with disabilities in the United States to live the healthiest life possible. The work of CDC's National Center on Birth Defects and Developmental Disabilities (NCBDDD) in disability and health focuses on sustaining lifelong health. We collaborate with national and state partners to ensure children and adults with disabilities receive needed programs and services across their lifespan so they can reach their full potential, have an improved quality of life, and experience independence. We want to make every person count and are committed to equity in the health of people with disabilities at every stage of life.

[Learn more about budget](#)

[Learn more about state funding](#)

Accomplishments

- Communicated public health opportunities to improve the health of people with disabilities to thousands of health professionals and organizations through a presentation at Public Health Grand Rounds. The presentation, [Where in Health is](#)

Video: What's Disability to Me?



[Watch this video](#) to see the experience of one person with a disability.

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[Disability? Public Health Practices to Include Persons with Disabilities](#), also highlighted accomplishments of partners and public health agencies, and resulted in a [scientific article published in MMWR](#).

- Increased public health capacity in 18 states using the [Disability and Health network](#) to plan, prepare and include people with disabilities in health-protecting programs and services. The majority of states have identified policy needs within their state; worked to increase the number of facilities providing preventive healthcare screenings; and assessed state emergency plans – all to better include, provide access to, and ultimately improve the health of, people with disabilities.
- Supported evidence for the health needs and disparities of people with disabilities, including risk for chronic conditions and low utilization of preventive screenings, through [Disability and Health Data System \(DHDS\)](#). Since its initial launch in December 2011, DHDS has been helping national and state organizations demonstrate impact in improving the health of people with disabilities by using data to build partnerships with programs, such as cancer control, tobacco control and diabetes.
- Achieved the task of getting 5 of 6 HHS-recommended disability identifier questions in the Behavioral Risk Factor Surveillance System (BRFSS), a major CDC survey system. NCBDDD will continue to collaborate with other CDC programs to include the questions in additional surveys. With this work, we will further assess disparities in health and identify existing prevention strategies that can be adapted to include people with disabilities.



IMPROVING HEALTH OF PEOPLE WITH DISABILITIES

1 IN 5

AMERICANS HAS
SOME KIND OF
DISABILITY

Annual **healthcare costs** associated with disability are nearly

 **\$400
BILLION**

Early hearing screening and intervention for children with hearing loss **saves approximately**

**\$200
MILLION**

in additional education costs each year



Looking to the Future

Did You Know?

- An estimated [37 million](#) to [56 million](#) people live with a disability.
- 4 in 10 people with disabilities have fair or poor health.²
- Disability-associated health-care expenditures have been estimated at nearly \$400 billion in 2006, more than a quarter of all national health expenditures for that year.³

NCBDDD's Division of Human Development and Disability is committed to protecting the health of people with disabilities across their lifespan by integrating CDC's public health science with national and state-based programs. We will work to reduce health disparities of people with disabilities by including them in public health surveys, health promotion programs (including healthy weight activities), emergency preparedness and planning efforts, and accessible healthcare services. In addition to our national data activities, we will continue to make sure people with disabilities are included in emergency preparedness and response efforts – there are too many tragic stories of people with disabilities being left out and left behind. We will work with states to ensure that individuals with disabilities are included in ongoing state disease prevention, health promotion, and emergency response activities. We will partner with national organizations to improve the lives of individuals living with disabilities by delivering health information, education and consultation to the public.

Notable 2013 Scientific Publications

Armour BS, et al. [Disability prevalence among healthy weight, overweight, and obese adults](#). Obesity (Silver Spring). 2013 Apr;21(4):852-855.

Benjamin G, et al. [CDC grand rounds: public health practices to include persons with disabilities](#). MMWR Morbidity and Mortality Weekly Report. 2013;62:697-701.

Fox MH, et al. [Disability, health, and multiple chronic conditions among people eligible for both Medicare and Medicaid, 2005-2010](#). Preventing Chronic Disease. 2013 Sep 19;10:E157.

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Fox MH, et al. Reducing obesity among people with disability. Journal of Disability Policy Studies. 2013 July 12;1044207313494236.

Krahn G, et al. [Health disparities of adults with intellectual disabilities: What do we know? What do we do?](#) Journal of Applied Research in Intellectual Disabilities. 2013 Jul 31;doi: 10.1111/jar.12067.

Krahn G, et al. [Toward a conceptual model for national policy and practice considerations.](#) Disability and Health Journal. 2014 Jan;7(1):13-18. Epub Aug 5, 2013.

Perou R, et al. [Mental health surveillance among children--United States, 2005-2011.](#) MMWR Morbidity and Mortality Weekly Report, 2013 am y 17; 62(Suppl 2):1-35.

Reichard A, et al. [Using population-based data to examine preventive services by disability type among dually eligible \(Medicare/Medicaid\) adults.](#) Disability and Health Journal. 2013 Apr; 6(2);75-86.

Sinclair LB, et al. [A tool for enhancing strategic planning: a modeled use of the International Classification of Functioning, Disability and Health.](#) International Journal of Health Planning and Management. 2013 Apr-Jun;28(2):172-180.

Visser S, Danielson M, Bitsko R, et al. [Trends in the Parent-Report of Health Care Provider-Diagnosis and Medication Treatment for ADHD disorder: United States, 2003–2011.](#) J Am Acad Child Adolesc Psychiatry. 2013 [published online November 22] doi: 10.1016/j.jaac.2013.09.001.

References

1. CDC. Other Data & Statistics. Atlanta, GA: US Department of Health and Human Services, CDC; 2010. Available at <http://www.cdc.gov/ncbddd/disabilityandhealth/data-highlights.html>.
2. CDC. Disability and Health Data System (DHDS). Atlanta, GA: US Department of Health and Human Services, CDC; 2010. Available at <http://dhds.cdc.gov>.
3. Anderson WL, Armour BS, Finkelstein EA, Wiener JM. Estimates of state-level health-care expenditures associated with disability. Public Health Rep 2010;125:44–51.

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<http://www.cdc.gov/ncbddd/aboutus/annualreport2013>

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